

F18000005187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

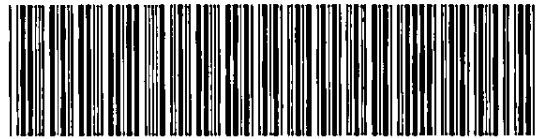
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PREMIER System Integrators, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Greg Clark

Name of Person

PREMIER System Integrators, Inc.

Firm/Company

140 Weakley Lane

Address

Smyrna, TN 37167

City/State and Zip code

accounting@premier-system.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Greg Clark

615 355-7256
at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,
Certificate of Status &
Certified Copy |
|--|--|---|---|

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. PREMIER System Integrators, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Tennessee 3. 62-1475873
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. August 19, 1991 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. October 23, 2018
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 140 Weakley Lane, Smyrna, TN 37167
(Principal office address)
- (Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: C T Corporation System
- Office Address: 1200 South Pine Island Road
- Plantation 33324
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Hiedi M. Liesch

Hiedi M. Liesch, Asst. Secretary

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached addendum.

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Kenneth W. Coggins

Address: 140 Weakley Lane
Smyrna, TN 37167

Vice President: David Lax

Address: 140 Weakley Lane
Smyrna, TN 37167

Secretary: Robert W. Hayes

Address: 140 Weakley Lane, Smyrna, TN 37167

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. David Lax, Vice President

(Typed or printed name and capacity of person signing application)



Directors:

Kenneth W. Coggins
140 Weakley Lane
Smyrna, TN 37167

Robert W. Hayes
140 Weakley Lane
Smyrna, TN 37167

David Lax
140 Weakley Lane
Smyrna, TN 37167

Sammie K. McCaleb
140 Weakley Lane
Smyrna, TN 37167

Marcus J. Bendickson
11009 Stone Mt. Drive
Huntsville, AL 35803



Tre Hargett
Secretary of State

Division of Business Services
Department of State

State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

GREGORY CLARK
140 WEAKLEY LANE
SMYRNA, TN 37167

October 23, 2018

Request Type: Certificate of Existence/Authorization
Request #: 0293712

Issuance Date: 10/23/2018
Copies Requested: 1

Document Receipt

Receipt #: 004343969
Payment-Credit Card - State Payment Center - CC #: 3742320675

Filing Fee: \$20.00
\$20.00

Regarding: PREMIER SYSTEM INTEGRATORS, INC.

Filing Type: For-profit Corporation - Domestic
Formation/Qualification Date: 08/19/1991
Status: Active
Duration Term: Perpetual
Business County: RUTHERFORD COUNTY

Control #: 243996
Date Formed: 08/19/1991
Formation Locale: TENNESSEE
Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

PREMIER SYSTEM INTEGRATORS, INC.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

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